



2-04; 11:35AM; NIKOLAI MERSEREAU

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Complete and send this form, together with applicable fee(s), to: Mail

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7590 09/30/2004

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Anna Lemke	(Depositor's name)
<i>Anna Lemke</i>	(Signature)
November 2, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/608,401	06/27/2003	Lung-Po Tsai	CFP-014915 (15745-384)	7951

TITLE OF INVENTION: AIR-CUSHIONED BED WITH BUILT IN AIR BLOWER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	12/30/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LUU, TUYET PHUONG PHAM	3644	005-713000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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- Alan D. Kamrath

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *Alan D. Kamrath* Date November 2, 2004

Typed or printed name Alan D. Kamrath Registration No. 28227

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